# Washington State Department of Health Office of Emergency Medical and Trauma System Emergency Medical Technician-Basic Curricula

# **APPENDIX H**

# EMT-BASIC Practical Evaluation Guidelines and Skill Sheets

# FLOW CHART OF THE INITIAL EMT-B COURSE PRACTICAL SKILL EVALUATION PROCESS

# Step # 1

**Initial EMT-B Students** must demonstrate proficiency on practical skills identified for each lesson using practical evaluation skills sheets identified on page H-6. (EVALUATION LESSONS MAY BE COMBINED WITH PRACTICAL SKILLS LABS TO MEET THIS REQUIREMENT). Students <u>must</u> achieve the required score for each skill listed on page H-47, <u>and</u> receive <u>NO</u> check marks in the Critical Criteria section.

All evaluations must be completed by DOH-approved BLS Evaluators.

# **Step # 2**

**Initial EMT-B Students** must complete clinical/field rotations prior to entrance to the comprehensive end of course evaluation. Information regarding clinical and field rotations is located on pages H-3 and H-4.

# **Step # 3**

**Initial EMT-B Students** must complete the COMPREHENSIVE END OF COURSE PRACTICAL SKILLS EVALUATION using the role play model identified on H-5, and skill sheets on pages H-39 and H-41. All evaluations must be completed by DOH-approved BLS Evaluators.

# **Step # 4**

**Initial EMT-B Students:** SEIs must issue a CERTIFICATE of COURSE COMPLETION attesting to student competency for the student to be eligible to take the Washington State written certification examination. Prior to issuing the certificate, SEIs must verify the student's:

- a. comprehensive cognitive, affective and psychomotor abilities.
- b. successful completion of the clinical/field rotation following the procedures identified on pages H-3 and H-4.

# **Step # 5**

**Initial EMT-B Students:** Following receipt of an SEI issued Certificate of Course Completion, the student is eligible to take the Washington State written certification examination.

# Emergency Medical Technician Basic - National Standard Curriculum Washington State Amended Edition - Revised September 1996

# NARRATIVE OF THE INITIAL EMT-B COURSE PRACTICAL SKILL EVALUATION PROCESS

# PRACTICAL SKILL EVALUATIONS - Step # 1

The practical skills evaluation sheets provided in this appendix are to be used in conjunction with the core curriculum and are organized in the order of the corresponding lessons. They should be copied and provided to each student at the beginning of the training course and are to be used to document the performance of required skills evaluations throughout the training course and during the Comprehensive End of Course Evaluation.

# **Required Practical Skills Evaluations**

Students must demonstrate proficiency on practical skills identified for each "evaluation lesson" using the required practical skills evaluation sheets specified for that lesson on page H-6. (EVALUATION LESSONS MAY BE COMBINED WITH PRACTICAL SKILLS LABS TO MEET THIS REQUIREMENT). All evaluations must be completed by DOH-approved BLS Evaluators.

#### **Individual Practical Skills Evaluation Sheets**

The individual practical skills evaluation sheets located on pages H-11 through H-37 are to be used to document the performance of students during course practical skills evaluations. All evaluations must be completed by DOH-approved BLS Evaluators. Evaluator initials must appear on each evaluation. All practical skill evaluations must be successfully completed before participating in the Comprehensive End of Course Evaluation. Students <u>must</u> achieve the required score for each skill listed on page H-47, <u>and</u> receive <u>NO</u> check marks in the Critical Criteria section.

#### **Comprehensive End of Course Evaluation Skill Sheets**

The Comprehensive End of Course Evaluation skill sheets located on pages H-39 and H-41 are to be used to document the performance of students during the Comprehensive End of Course Evaluation. All evaluations must be completed by DOH-approved BLS Evaluators.

# Initial EMT-B Course Practical Skills Evaluation & Comprehensive Course Evaluation Summary Sheet

The Practical Skills Evaluation And Comprehensive Course Evaluation Summary Sheet located on page H-43 is to be used to document the final results of each student's performance following individual practical skills evaluations and the Comprehensive End of Course Evaluation. The SEI or MPD signature is required on the Practical Skills Evaluation and Comprehensive End Of Course Evaluation Summary Sheet.

## CLINICAL/FIELD ROTATIONS - Step # 2

In addition to the hours of instruction and practical skills evaluations, this course requires that the student successfully complete patient interactions in a clinical setting. The training course may utilize emergency departments, clinics or physician offices. The program director or medical director must establish appropriate relationships with various clinical sites to assure adequate contact with patients.

The student should interview and assess a minimum of five (5) patients. The student should record the patient history and assessment on a prehospital care report; i.e., Washington State Medical Incident Report (MIR), just as if interacting with this patient in a field setting. The prehospital care report should then be reviewed by the Primary Instructor to assure competent documentation practices in accordance with the minimum data set. The training course must establish a feedback system to assure that students have acted safely and professionally during their training. **Students should receive a written report of their performance by clinical or ambulance staff.** 

Note: Students must complete clinical/field rotations prior to entrance to the Comprehensive End of Course Evaluation.

# **HOSPITAL OBSERVATION TIME - EMT-B COURSE (Current Policy #21)**

The Department of Health, Office of Emergency Medical and Trauma Prevention's Policy #21 requires ten (10) hours of hospital observation as part of the successful completion of the EMT Course. Any combination of the following will meet these requirements.

- I. Five hours or more of hospital observation in one or more of the departments listed:
  - A. Intensive care unit
  - B. Coronary care unit
  - C. Emergency department
  - D. OB-GYN
  - E. Recovery room
  - F. Any other department approved by the MPD
- II. Up to five (5) hours of the required time may be completed on ambulance runs involving the care of sick or injured patients.

Students who have been reported to have difficulty in the clinical or field setting must receive remediation and redirection. Students should be required to repeat clinical or field setting experiences until they are deemed competent within the goals established by the County Medical Program Director.

# COMPREHENSIVE END OF COURSE EVALUATION - Step # 3

The purpose of the Comprehensive End of Course Evaluation is to combine cognitive knowledge and practical skills learned during the course to provide emergency care as if responding to a real field situation. This evaluation is intended to be general rather than specific in nature to determine if the team has the basic knowledge and skill necessary to perform adequately during an EMS emergency.

The Comprehensive End of Course Evaluation is conducted in a role play format using teams of students to provide emergency care to the patient. The Comprehensive End of Course Evaluation should be designed to be a realistic experience for the students. The SEI is responsible for developing specific medical and trauma scenarios to be used by the student teams during the Comprehensive End of Course Evaluation. The appropriate patient care must be performed by the student team. If appropriate care is not provided, remediation and repeat of a station will be necessary.

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#### **ROLE PLAY MODEL**

Role Play is individual and/or team practical skill performance evaluations from written scenarios. This method must be used for the Comprehensive End of Course Evaluation. Role Play is also appropriate for end of lesson evaluations and practical skills evaluations

#### SCENARIO DEVELOPMENT

It is the SEI's responsibility to develop scenarios used in Role Play evaluation. During the scenario development, skill combinations are encouraged. For example: for the Trauma evaluation, oxygen, splinting, PASG stabilization and immobilization could be combined. For the Medical evaluation, pharmacology elements could be introduced to include indications, contraindication, dosages, side effects, etc.

# CERTIFICATE OF COURSE COMPLETION - Step # 4

SEIs must issue a CERTIFICATE OF COURSE COMPLETION attesting to student competency for the student to be eligible to take the Washington State written certification examination. Prior to issuing the certificate, SEIs must verify the student's:

- a. comprehensive cognitive, affective and psychomotor abilities.
- b. successful completion on the clinical/field rotation following the procedures identified on pages H-3 and H4.

#### The CERTIFICATE OF COURSE COMPLETION **MUST** include:

- Course approval number
- Course location
- Student's name
- SEI's name and signature
- Course completion date

## WASHINGTON STATE WRITTEN CERTIFICATION EXAMINATION - Step # 5

Following receipt of an SEI issued Certificate of Course Completion, the student is eligible to take the Washington State written certification examination.

# REQUIRED PRACTICAL SKILLS EVALUATIONS FOR INITIAL (EMT-B) CLASS

Lesson Number	LESSON TITLE	REQUIRED PRACTICAL SKILLS EVALUATION SHEETS
2-3	Evaluation: AIRWAY MODULE	H-11, 13, 15, & 17
3-10	Evaluation: PATIENT ASSESSMENT MODULE	H- 19 & 20, 21 & 22
4-11	Evaluation: MEDICAL/BEHAVIORAL EMERGENCIES and OBSTETRICS	H-23 & 25
5-6	Evaluation: TRAUMA MODULE	H-27, 29, 31, 33, 35, & 37
End of Course	Comprehensive End of Course Practical Evaluation MEDICAL	H-39
End of Course	Comprehensive End of Course Practical Evaluation TRAUMA	H-41

# FLOW CHART FOR THE EMT-B ORIENTATION PROGRAM FOR EXPERIENCED EMTS - PRACTICAL SKILL EVALUATION PROCESS

# Step # 1

Recertifying EMTs must complete the 1996 EMT-B Orientation Program for Experienced EMTs as part of the required Continuing Medical Education (CME) or Ongoing Training and Evaluation Program(OTEP). Refer to Licensing and Certification requirements for educational timeframes.

# **Step # 2**

**Recertifying EMTs** must demonstrate proficiency on practical skills identified for each module, using the required practical skills evaluation skills sheets identified on page H-10, as part of the orientation training. Students <u>must</u> achieve the required score for each skill listed on page H-47, <u>and</u> receive <u>NO</u> check marks in the Critical Criteria section.

All evaluations must be completed by DOH-approved BLS Evaluators.

# **Step # 3**

**Recertifying EMTs** must complete the COMPREHENSIVE END OF COURSE PRACTICAL SKILLS EVALUATION using the role play model identified on H-9, and skill sheets on pages H-39 and H-41. All evaluations must be completed by DOH-approved BLS Evaluators.

# Step # 4

**Recertifying EMTs:** SEIs must document the completion of the **1996 EMT-B Orientation Program for Experienced EMTs** and attest to the student's competency for the student to be eligible for Washington State recertification. Prior to documenting the student's completion, SEIs must verify the student's comprehensive cognitive, affective and psychomotor abilities.

# Step #5

**Recertifying EMTs:** Following receipt of an SEI issued document attesting to the completion of the **1996 EMT-B Orientation Program for Experienced EMTs** and the student's competency, the recertifying EMT has met the requirement for completing the EMT-B Orientation Program (completed through CME or OTEP) necessary for recertification. When the recertifying EMT has completed all CME or OTEP requirements, they are eligible for recertification.

# NARRATIVE OF THE EMT-B ORIENTATION PROGRAM FOR EXPERIENCED EMTS - PRACTICAL SKILL EVALUATION PROCESS

# COMPLETION OF EMT-B ORIENTATION PROGRAM FOR EXPERIENCED EMTS - Step # 1

**Recertifying EMTs** must complete the **1996 EMT-B Orientation Program for Experienced EMTs** as part of the required Continuing Medical Education (CME) or Ongoing Training and Evaluation Program (OTEP). The practical skills evaluation sheets provided in this appendix are to be used in conjunction with the orientation curriculum. They should be copied and provided to each student at the beginning of the orientation program, and are to be used to document the performance of required skills evaluations throughout the orientation program, and during the Comprehensive End of Course Evaluation.

# PRACTICAL SKILL EVALUATIONS - Step # 2

**Recertifying EMTs** must demonstrate proficiency on practical skills identified for each "module", using the required practical skills evaluation sheets specified for that module on page H-10 as part of the orientation training. All evaluations must be completed by DOH-approved BLS Evaluators.

#### **Individual Practical Skills Evaluation Sheets**

The individual practical skills evaluation sheets located on pages H-11 through H-37 are to be used to document the performance of students during the orientation program practical skills evaluations. All evaluations must be completed by DOH-approved BLS Evaluators. Evaluator initials must appear on each evaluation. All practical skill evaluations must be successfully completed before participating in the Comprehensive End of Course Evaluation. Students <u>must</u> achieve the required score for each skill listed on page H-47, <u>and</u> receive <u>NO</u> check marks in the Critical Criteria section.

#### **Comprehensive End of Course Evaluation Skill Sheets**

The Comprehensive End of Course Evaluation skill sheets located on pages H-39 and H-41 are to be used to document the performance of students during the Comprehensive End of Course Evaluation. All evaluations must be completed by DOH-approved BLS Evaluators.

# EMT-B Orientation (Recertification) Practical Skills Evaluation & Comprehensive Course Evaluation Summary Sheet

The Practical Skills Evaluation And Comprehensive Course Evaluation Summary Sheet located on page H-45 is to be used to document the final results of each student's performance following individual practical skills evaluations and the Comprehensive End of Course Evaluation. The SEI or MPD signature is required on the Practical Skills Evaluation and Comprehensive End Of Course Evaluation Summary Sheet

# **COMPREHENSIVE END OF COURSE EVALUATION - Step #3**

The purpose of the Comprehensive End of Course Evaluation is to combine cognitive knowledge and practical skills learned during the course to provide emergency care as if responding to a real field situation. This evaluation is intended to be general rather than specific in nature to determine if the team has the basic knowledge and skills necessary to perform adequately during an EMS emergency.

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The Comprehensive End of Course Evaluation is conducted in a role play format using teams of students to provide emergency care to the patient. The Comprehensive End of Course Evaluation should be designed to be a realistic experience for the students. The SEI is responsible for developing specific medical and trauma scenarios to be used by the student teams during the Comprehensive End of Course Evaluation. The appropriate patient care must be performed by the student team. If appropriate care is not provided, remediation and repeat of a station will be necessary.

#### **ROLE PLAY MODEL**

Role Play is individual and/or team practical skill performance evaluations from written scenarios. This method must be used for the Comprehensive End of Course Evaluation. Role Play is also appropriate for end-of-lesson evaluations and practical skills evaluations

#### SCENARIO DEVELOPMENT

It is the SEI's responsibility to develop scenarios used in Role Play evaluation. During the scenario development, skill combinations are encouraged. For example: for the Trauma evaluation, oxygen, splinting, PASG stabilization and immobilization could be combined. For the Medical evaluation, pharmacology elements could be introduced to include indications, contraindication, dosages, side effects, etc.

## DOCUMENTING COMPLETION OF EMT-B ORIENTATION PROGRAM - Step # 4

**Recertifying EMTs:** SEIs must document the completion of the **1996 EMT-B Orientation Program for Experienced EMTs** and attest to the student's competency for the student to be eligible for Washington State recertification. Prior to documenting the student's completion, SEIs must verify the student's comprehensive cognitive, affective and psychomotor abilities.

The documentation of the **1996 EMT-B Orientation Program for Experienced EMTs** must include:

- Program location
- Student's name
- SEI's name and signature
- Program completion date

# COMPLETION OF CME / OTEP REQUIREMENTS AND RECERTIFICATION - Step # 5

**Recertifying EMTs:** Following receipt of an SEI-issued document attesting to the completion of the **1996 EMT-B Orientation Program for Experienced EMTs** and the student's competency, the recertifying EMT has met the requirement for completing the EMT-B Orientation Program (completed through CME or OTEP) necessary for recertification. When the recertifying EMT has completed all CME or OTEP requirements, they are eligible for recertification.

# REQUIRED PRACTICAL SKILLS EVALUATIONS FOR EMT-B ORIENTATION (RECERTIFICATION) PROGRAM

Module Number	MODULE TITLE	REQUIRED PRACTICAL SKILLS EVALUATION SHEETS
2	PATIENT ASSESSMENT	H- 19 & 20, 21 & 22
3	AIRWAY	H-11, 13, 15 & 17
4	INTERVENTIONS	H-23, 25, 27, 29, 31, 33, 35 & 37
End of Course	Comprehensive End of Course Practical Evaluation MEDICAL	H-39
End of Course	Comprehensive End of Course Practical Evaluation TRAUMA	H-41

# MOUTH-TO-MASK WITH SUPPLEMENTAL OXYGEN

	Points Possible	Points Awarded
	1	
	1	
	1	
	1	
	1	
	1	
	1	
econds		
TOTAL:	8	
	ninute are be	elow 800 ml)
	าร	1 1 1 econds TOTAL: 8

# **AIRWAY MAINTENANCE**

Student Name	Date		
OROPHARYNGEAL AIRWAY	Points Possible	Points Awarded	
Takes or verbalizes body substance isolation precautions	1		
Selects appropriate size airway	1		
Measures airway	1		
Inserts airway without pushing the tongue posteriorly	1		
NOTE: The evaluator must advise the candidate that the pa becoming conscious	ntient is gagging	g and	
Removes oropharyngeal airway	1		

# **SUCTION**

NOTE: The evaluator must advise the candidate to suction oropharynx/nasopharynx	the patient's	
Turns on/prepares suction device	1	
Assures presence of mechanical suction	1	
Inserts suction tip without suction	1	
Applies suction to the oropharynx/nasopharynx	1	

# **NASOPHARYNGEAL AIRWAY**

NOTE: The evaluator must advise the candidate to insert a	nasopharyngea	l airway
Selects appropriate size airway	1	
Measures airway	1	
Verbalizes lubrication of the nasal airway	1	
Fully inserts the airway with the bevel facing toward the septum	1	
TOTAL:	13	

CRITIC	AL CRITERIA		<u>-                                    </u>	]
	Did not take or verbalize body substance isolation precau			
<u> </u>	Did not obtain a patent airway with the oropharyngeal airway bid not obtain a patent airway with the nasopharyngeal airway bid not obtain a patent airway with the nasopharyngeal airway bid not obtain a patent airway with the nasopharyngeal airway bid not obtain a patent airway with the nasopharyngeal airway bid not obtain a patent airway with the oropharyngeal airway bid not obtain a patent airway with the oropharyngeal airway bid not obtain a patent airway bid	•		
		Evalua	ator Initials:	

# VENTILATORY MANAGEMENT Bag-Valve Mask

Student Name Dat	Date		
	Points Possible	Points Awarded	
Takes or verbalizes body substance isolation precautions	1		
Opens airway manually	1		
Elevates tongue and inserts simple airway adjunct (oropharyngeal or nasopharyngeal airway)	1		
NOTE: The examiner now informs the candidate no gag reflex is present accepts the adjunct	and the pa	tient	
Attaches the oxygen reservoir to the BVM	1		
Attaches BVM to high flow oxygen	1		
Ventilates the patient while maintaining seal at the proper volume and rate (800-1200 ml per breath/10-20 breaths per minute)	1		
NOTE: the evaluator must witness ventilations for at least 30 seconds	<u> </u>		
TOTAL:	6		
Did not take or verbalize body substance isolation precautions Did not initiate ventilations within 30 seconds after applying gloves or int greater than 30 seconds at any time. Did not voice or provide high oxygen concentrations (15 L/min or greate Did not ventilate patient at a rate of at least 10/minute Did not provide adequate seal or volume per breath (maximum of 2 erro Inserts any adjunct in a manner that would be dangerous to the patient	r)		
Evalu	ator Initial	s:	

# **OXYGEN ADMINISTRATION**

Student Name	Date		<del></del>
	P P	oints ossible	Points Awarded
Takes or verbalizes body substance isolation precautions		1	
Assembles regulator to tank		1	
Opens tank		1	
Checks for leaks		1	
Checks tank pressure		1	
Attaches non-rebreather mask		1	
Prefills reservoir		1	
Adjusts liter flow to 15 L/min or greater		1	
Applies and adjusts mask to the patient's face		1	
NOTE: The evaluator must advise the candidate to apply	a nasal cannula to	the patient.	
Attaches nasal cannula to oxygen		1	
Adjusts liter flow up to 6 L/min		1	
Applies nasal cannula to the patient		1	
NOTE: The evaluator must advise the candidate to discor	ntinue oxygen there	ару.	
Removes the nasal cannula		1	
Shuts off the regulator		1	
Relieves the pressure within the regulator		1	
TOTAL:		15	
CRITICAL CRITERIA  Did not take or verbalize body substance isolation pred Did not assemble the tank and regulator without leaks Did not adjust the device to the correct liter flow for the Did not prefill the reservoir bag Did not adjust the device to the correct liter flow for the	non-rebreather mas		
	Evaluator Ini	itials:	

# **Appendix H** – EMT-BASIC Practical Skill Evaluation Skill Sheets

# PATIENT ASSESSMENT/MANAGEMENT - MEDICAL

Student Nar	ne				Date _			
							Points Possible	Points e Awarded
Takes or ver	balizes boo	ly substand	e isolation pre	ecautions			1	
SCENE SIZI	E-UP							
Determines	the scene is	safe					1	
Determines <sup>1</sup>	the mechan	ism of inju	ry/nature of illi	ness			1	
Determines <sup>1</sup>	the number	of patients					1	
Requests ac	lditional hel	p if necess	ary				1	
Considers st							1	
INITIAL ASS								
Verbalizes g							1	
			ent life threats				1	
Determines	responsiver		of consciousne	ess			1	
Assesses a	irway and		ssessment				1	
breathing			itiates approp ssures adequa				1	
Assesses c	irculation		ssesses/contr				1	
			ssesses pulse	•	3		1	
					and condition)		1	
Identifies pri	ority patient	s/makes tr	ansport decisi	on			1	
<b>FOCUSED F</b>	PHYSICAL	EXAM AN	D HISTORY/F	RAPID ASSE	SSMENT			
<b>S</b> igns and S	ymptoms (A	Assess hist	ory of present	illness)			1	
Respiratory	Cardiac	Altered	Allergic	Poisoning/	Environmental	Obst	etrics	Behavioral
		Level of Conscious- ness	Reaction	Overdose	Emergency			
*Onset	*Onset	*Description	*History of	*Substance	*Source	*Are	/ou	*How do you
*D	*D	of the	allergies	*10//	*F '	pregn	ant?	feel?
*Provokes	*Provokes	episode	*What were	*When did you ingest or	*Environment	*How	long	*Determine
*Quality	*Quality	*Onset	you exposed	become	*Duration	have		suicidal
*Radiates	*Radiates	*Duration	to?	exposed?	*Loss of	been		tendencies
Radiates	Radiales	Duration	*How were you	*How much did		pregn	ant	*Is the patient
*Severity	*Severity	*Associated	exposed?	you ingest?	.=	*Pain		a threat to self
*Time	*Time	symptoms	*Effects	*Over what	*Effects - General or	contra	actions	or others?
		*Evidence of		time period?	local		ding or	*Is there a
*Interventions	*Inter- ventions	trauma	*Progressions	*Interventions		disch	arge	medical problem?
	Veritions	*Inter-	*Interventions	Interventions		*Do y	ou feel	problem:
		ventions		*Estimated		the ne		*Past medical
		*Seizures		weight		to pu	sn?	history
				*Effects		*Last		*Interventions
		*Fever				mens		*Medications
						pendo	4	Medications
						*Crow	ning	

	Points Possible	Points Awarded
Allergies	1	
Medications	1	
Past medical history	1	
Last meal	1	
Events leading to present illness (rule out trauma)	1	
Performs focused physical examination Assesses affected body part/system or, if indicated, completes rapid assessment	1	
VITALS (Obtains baseline vital signs)	1	
INTERVENTIONS - Obtains medical direction or verbalizes standing order for medication interventions and verbalizes proper additional intervention/treatment	1	
TRANSPORT (Re-evaluates transport decision)	1	
DETAILED PHYSICAL EXAMINATION	,	
Completes detailed physical examination	1	
ONGOING ASSESSMENT (verbalized)	•	
Repeats initial assessment	1	
Repeats vital signs	1	
Repeats focused assessment regarding patient complaint or injuries	1	
Checks interventions	1	
TOTAL:	31	

# **CRITICAL CRITERIA**

_Did not take or verbalize body substance isolation precautions if necessary
_Did not determine scene safety
Did not obtain medical direction or verbalize standing orders for medication interventions
Did not provide high concentration of oxygen
Did not evaluate and find conditions of airway, breathing, circulation
Did not manage/provide airway, breathing, hemorrhage control or treatment for shock
Did not differentiate patient's needing transportation versus continued assessment at the scene
Does detailed or focused history/physical examination before assessing airway, breathing and circulation

Evaluator initials:	Evaluator	Initials <sup>.</sup>	
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# PATIENT ASSESSMENT/MANAGEMENT - TRAUMA

Student Name		Date
		Points Points Possible Awarded
Takes or verbalizes bo	ody substance isolation precautions	1
SCENE SIZE-UP		
Determines the scene	is safe	1
Determines the mecha	anism of injury	1
Determines the number	er of patients	1
Requests additional he	elp if necessary	1
Considers stabilization	of spine	1
INITIAL ASSESSMEN	IT	
Verbalizes general imp	pression of patient	1
Determines chief comp	plaint/apparent life threats	1
Determines responsive	eness	1
Assesses airway and breathing	Assessment Initiates appropriate oxygen therapy Assures adequate ventilation Injury management	1 1 1 1
Assesses circulation	Assesses for & controls major bleeding Assesses pulse Assesses skin (color, temp, and condition)	1 1 1
Identifies priority patier	nts/makes transport decision	1
FOCUSED PHYSICAL	L EXAM AND HISTORY/RAPID TRAUMA AS	SESSMENT
Selects appropriate as	sessment (focused or rapid assessment)	1
Obtains baseline vital	signs	1
Obtains S.A.M.P.L.E. I	history	1

Points	Points
Possible	Awarded

DETAILED PHYSICAL	EXAMINATION		
Assesses the head	Inspects and palpates the scalp and ears Assesses the eyes Assesses the facial area including oral & nasal area	1 1 1	
Assesses the neck	Inspects and palpates the neck Assesses for JVD Assesses for tracheal deviation	1 1 1	
Assesses the chest	Inspects Palpates Auscultates the chest	1 1 1	
Assesses the abdomen/pelvis	Assesses the abdomen Assesses the pelvis Verbalizes assessment of genitalia/perineum as needed	1 1 1	
Assesses the extremities	point for each extremity     includes inspection, palpation, and assessment of     pulses, sensory and motor activities	4	
Assesses the posterior	Assesses thorax Assesses lumbar	1	
	juries and wounds appropriately 1 point for nent of each injury/wound up to a maximum of 2	2	
Verbalizes reassessme	ent of the vital signs	1	
	TOTAL:	41	

CRITICAL CRITERIA

# **Cardiac Arrest Management/AED**

Student Name	Date		
	F	Points Possible	Points Awarded
ASSESSMENT			
Takes or verbalizes body substance isolation precautions		1	
Briefly questions rescuer about arrest events		1	
Directs rescuer to stop CPR		1	
Verifies absence of spontaneous pulse		1	
Turns on defibrillator power		1	
Attaches automated defibrillator to patient		1	
Ensures all individuals are standing clear of the patient		1	
Initiates analysis of rhythm		1	
Delivers shock (up to three successive shocks)		1	
Verifies absence of spontaneous pulse		1	
TRANSITION			
Directs resumption of CPR		1	
Gathers additional information on arrest event		1	
Confirms effectiveness of CPR (ventilation and compressions)		1	
INTEGRATION			
Directs insertion of a simple airway adjunct (oropharyngeal/nasopha	ryngeal)	1	
Directs ventilation of patient		1	
Assures high concentration of oxygen connected to the ventilatory a	djunct.	1	
Assures CPR continues without unnecessary/prolonged interruption		1	
Re-evaluates patient/CPR in approximately one minute		1	
Repeats defibrillator sequence		1	
TRANSPORTATION			
Verbalizes transportation of patient		1	
	TOTAL:	20	
CRITICAL CRITERIA  Did not take or verbalize body substance isolation precautions Did not evaluate the need for immediate use of the AED Did not direct initiation/resumption of ventilation/compressions at a Did not assure all individuals were clear of patient before delivering Did not operate the AED properly (inability to deliver shock)			
	Evaluate	or Initia	als:

# **Appendix H** – EMT-BASIC Practical Skill Evaluation Skill Sheets

# **EPINEPHRINE AUTO-INJECTOR**

tudent Name [	Date	
T	Points Possible	Points Awarded
Takes or verbalizes body substance isolation	1	
Contacts medical direction for authorization	1	
Obtains patient's auto-injector	1	
Assures injector is prescribed for the patient	1	
Checks medication for expiration date	1	
Checks medication for cloudiness or discoloration	1	
Removes safety cap from the injector	1	
Selects appropriate injection site (thigh or shoulder)	1	
Pushes injector firmly against site	1	
Holds injector against site for a minimum of ten (10) second	onds 1	
Properly discards auto-injector	1	
Verbalizes monitoring the patient while transporting	1	
ТО	<b>TAL:</b> 12	

# \_\_\_\_Did not contact medical direction for authorization \_\_\_\_Did not check medication for prescription, cloudiness or discoloration \_\_\_\_Did not use an appropriate injection site \_\_\_\_Used the injector against the injection site for ten (10) seconds or longer \_\_\_\_Did not discard auto-injector into appropriate container

Evaluator Initials: \_\_\_\_\_

# **Appendix H** – EMT-BASIC Practical Skill Evaluation Skill Sheets

# **BLEEDING CONTROL/SHOCK MANAGEMENT**

Student Name Date		)	
	Points Possible	Points Awarded	
Takes or verbalizes body substance isolation precautions	1		
Applies direct pressure to the wound	1		
Elevates the extremity	1		
Applies a dressing to the wound	1		
Bandages the wound	1		
Note: The evaluator must now inform the candidate that the wound is still	l continuing	to bleed.	
Applies an additional dressing to the wound	1		
Note: The evaluator must now inform the candidate that the wound is still The second dressing does not control the bleeding.	l continuing	y to bleed.	
Locates and applies pressure to appropriate arterial pressure point	1		
Note: The evaluator must now inform the candidate that the bleeding is c patient is in compensatory shock.	ontrolled ar	nd the	
Applies high concentration oxygen	1		
Properly positions the patient	1		
Initiates steps to prevent heat loss from the patient	1		
Indicates need for immediate transportation	1		
TOTAL:	: 11		
CRITICAL CRITERIA	<u>L</u>	<u>-/ </u>	
Did not take or verbalize body substance isolation precautions Did not apply high concentration of oxygen Applies tourniquet before attempting other methods of bleeding control Did not control hemorrhage in a timely manner Did not indicate a need for immediate transportation			
Evalu	ıator İnitial	c.	

# IMMOBILIZATION SKILLS LONG BONE

Student Name	Date		
	Points Possib	le	Points Awarded
Takes or verbalizes body substance isolation precautions	1		
Directs application of manual stabilization	1		
Assesses motor, sensory and distal circulation	1		
NOTE: The evaluator acknowledges present and normal			
Measures splint	1		
Applies splint	1		
Immobilizes the joint above the injury site	1		
Immobilizes the joint below the injury site	1		
Secures the entire injured extremity	1		
Immobilizes hand/foot in the position of function	1		
Reassesses motor, sensory and distal circulation	1		
Note: The evaluator acknowledges present and normal			
тот	<b>AL</b> : 10		

# **CRITICAL CRITERIA**

 Grossly moves injured extremity
 Did not immobilize adjacent joints
 Did not assess motor, sensory and distal circulation after splinting

Evaluator Initials: \_\_\_\_\_

# **Appendix H** – EMT-BASIC Practical Skill Evaluation Skill Sheets

# **IMMOBILIZATION SKILLS - JOINT INJURY**

Student Name Dat		te	
		Points Possible	Points Awarded
Takes or verbalizes body substance isolation precautions		1	
Directs application of manual stabilization of the injury		1	
Assesses motor, sensory and distal circulation		1	
NOTE: The evaluator acknowledges present and normal			
Selects proper splinting material		1	
Immobilizes the site of the injury		1	
Immobilizes bone above injured joint		1	
Immobilizes bone below injured joint		1	
Reassesses motor, sensory and distal circulation		1	
NOTE: The evaluator acknowledges present and normal			
то	TAL:	8	
CRITICAL CRITERIA	-		
Did not support the joint so that the joint did not bear distal weight			
Did not immobilize bone above and below injured joint			
Did not reassess motor, sensory and distal circulation after splintin	ng		
E	Evalua	tor Initial	s:

# **Appendix H** – EMT-BASIC Practical Skill Evaluation Skill Sheets

# **IMMOBILIZATION SKILLS - TRACTION SPLINTING**

Student Name Date			
	Poin Poss	ts sible	Points Awarded
Takes or verbalizes body substance isolation precautions		1	
Directs application of manual stabilization of the injured leg		1	
Directs the application of manual traction		1	
Assesses motor, sensory and distal circulation		1	
NOTE: The evaluator acknowledges present and normal.	•		•
Prepares/adjusts splint to the proper length		1	
Positions the splint at the injured leg		1	
Applies the proximal securing device (e.g., ischial strap)		1	
Applies the distal securing device (e.g., ankle hitch)		1	
Applies mechanical traction		1	
Positions/secures the support straps		1	
Re-evaluates the proximal/distal securing devices		1	
Reassesses motor, sensory and distal circulation		1	
NOTE: The evaluator acknowledges present and normal.	,		•
NOTE: The evaluator must ask candidate how he/she would prepare transportation.	the patien	t for	
Verbalizes securing the torso to the long board to immobilize the hip		1	
Verbalizes securing the splint to the long board to prevent movement of th splint	е	1	
то	ΓAL:	14	
CRITICAL CRITERIA  Loss of traction at any point after it is assumed	<u> </u>		<u> </u>
<ul> <li>Did not reassess motor, sensory and distal circulation after splinting</li> <li>The foot is excessively rotated or extended after splinting</li> </ul>	)		
Did not secure the ischial strap before taking traction			
Final immobilization failed to support the femur or prevent rotation of	of the injure	d leg	
Secures leg to splint before applying mechanical traction	•		
NOTE: If the Sager splint is used without elevating the patient's leg, a not necessary. The candidate should be awarded 1 point as if NOTE: If the leg is elevated at all, manual traction must be applied before elevating the leg and used to pull	manual tra	action	n were app ne leg. The
E	valuator I	nitial	s:

# **Appendix H** – EMT-BASIC Practical Skill Evaluation Skill Sheets

# **SPINAL IMMOBILIZATION - LYING PATIENT**

Student Name		
	Points Possible	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Directs assistant to place/maintain head in neutral in-line position	1	
Directs assistant to maintain manual immobilization of the head	1	
Assesses motor, sensory and distal circulation in extremities	1	
Applies appropriate size extrication collar	1	
Positions the immobilization device appropriately	1	
Moves patient onto device without compromising the integrity of the spine	1	
Applies padding to voids between the torso and the board as necessary	1	
Immobilizes the patient's torso to the device	1	
Evaluates and pads behind the patient's head as necessary	1	
Immobilizes the patient's head to the device	1	
Secures the patient's legs to the device	1	
Secures the patient's arms to the device	1	
Reassesses motor, sensory and distal circulation in extremities	1	
TOTAL:	14	

## **CRITICAL CRITERIA**

 Releases or orders release of manual immobilization before it was maintained mechanically
 Patient manipulated or moved excessively causing potential spinal compromise
 Device moves excessively up, down, left or right on patient's torso
 Head immobilization allows for excessive movement
 Upon completion of immobilization, head is not in the neutral position
 Did not reassess motor, sensory and distal circulation after immobilization
 Immobilizes head to the board before securing torso
Evaluator Initials:

Did not immediately direct or take manual immobilization of the head

### **SPINAL IMMOBILIZATION - SEATED PATIENT**

	Points Possible	Points Awarded
	1	
		1
	1	
	1	
	1	
	1	
	1	
	1	
	1	
	1	
	1	
	1	
	1	
OTAL:	12	
al compro se tion	omise	anically
	ead s mainta al compro o se tion	1 1 1 1 1 1 1 1 1 1 1 1 1 1 DTAL: 12

### **COMPREHENSIVE END OF COURSE EVALUATION**

### **MEDICAL SCENARIO**

**Scenario development**: A realistic medical field scenario should be developed by the SEI using medical problems identified during the EMT-B course.

SKILLS OBSERVED	PERFORMANCE COMMENTS
Scene Size-Up	
Initial Assessment	
Focused History & Physical Examination & Rapid Transport	
Detailed Physical Examination	
Emergency Medical Care	
Vital Sign Assessment	
Transport appropriate to local protocols, procedures	
EVALUATOR(s) Initials:	

### **COMPREHENSIVE END OF COURSE EVALUATION**

### **TRAUMA**

**Scenario development:** A realistic trauma field scenario should be developed by the SEI using trauma injuries identified during the EMT-B course.

Team Name or Number:	
Skill Observed	Performance Comments
Scene Size-Up	
Initial Assessment	
Focused History & Physical Examination & Rapid Transport	
Detailed Physical Examination	
Emergency Medical Care	
Vital Sign Assessment	
Transport appropriate to local protocols, procedures and Trauma Triage Tool.	
EVALUATOR(s) Initials:	
Remediation and repeat of station ma	ay be necessary if evaluator determines poor

performance.

# INITIAL EMT-B COURSE PRACTICAL SKILLS EVALUATION AND COMPREHENSIVE END OF COURSE EVALUATION SUMMARY SHEET

#### **Student Name:**

Lesson Number	Page Number	Practical Skill	S	U	SEI Signature
2.3	H-11	Mouth to Mask with Supplemental Oxygen			
2.3	H-13	Oropharyngeal Airway			
2.3	H-13	Suction			
2.3	H-13	Nasopharyngeal Airway			
2.3	H-15	Ventilatory Management - Bag-Valve-Mask			
2.3	H-17	Oxygen Administration			
3.10	H-19 & 20	Patient Assessment - MEDICAL			
3.10	H-21 & 22	Patient Assessment - TRAUMA			
4.11	H-23	Cardiac Arrest Management/AED			
4.11	H-25	Epinephrine Auto-Injector			
5.6	H-27	Bleeding Control/Shock Management			
5.6	H-29	Immobilization Skills - LONG BONE			
5.6	H-31	Immobilization Skills - JOINT INJURY			
5.6	H-33	Immobilization Skills - TRACTION SPLINTING			
5.6	H-35	Spinal Immobilization - LYING PATIENT			
5.6	H-37	Spinal Immobilization - SEATED PATIENT			
End of Course	H-39	Comprehensive End of Course Evaluation - MEDICAL			
End of Course	H-41	Comprehensive End of Course Evaluation - TRAUMA			

# EMT-B ORIENTATION (RECERTIFICATION) PROGRAM PRACTICAL SKILLS EVALUATION AND COMPREHENSIVE END OF COURSE EVALUATION SUMMARY SHEET

#### **Student Name:**

Module Number	Page Number	Practical Skill	S	U	SEI Signature
2	H-19 & 20	Patient Assessment - MEDICAL			
2	H-21 & 22	Patient Assessment - TRAUMA			
3	H-11	Mouth to Mask with Supplemental Oxygen			
3	H-13	Oropharyngeal Airway			
3	H-13	Suction			
3	H-13	Nasopharyngeal Airway			
3	H-15	Ventilatory Management - Bag-Valve-Mask			
3	H-17	Oxygen Administration			
4	H-23	Cardiac Arrest Management/AED			
4	H-25	Epinephrine Auto-Injector			
4	H-27	Bleeding Control/Shock Management			
4	H-29	Immobilization Skills - LONG BONE			
4	H-31	Immobilization Skills - JOINT INJURY			
4	H-33	Immobilization Skills - TRACTION SPLINTING			
4	H-35	Spinal Immobilization - LYING PATIENT			
4	H-37	Spinal Immobilization - SEATED PATIENT			
End of Course	H-39	Comprehensive End of Course Evaluation - MEDICAL			
End of Course	H-41	Comprehensive End of Course Evaluation - TRAUMA			

### **Appendix H** – EMT-BASIC Practical Skill Evaluation Skill Sheets

# PRACTICAL SKILLS EVALUATION SHEET Required Scores for Successful Completion

Practical Skill Sheet Page Number	Practical Skill	Points Possible	Points Required to Successfull Complete Practical Skill
H-11	Mouth to Mask with Supplemental Oxygen	8	7
H-13	Oropharyngeal Airway Suction Nasopharyngeal Airway	13	11
H-15	Ventilatory Management - Bag-Valve-Mask	6	5
H-17	Oxygen Administration	15	12
H-19 & 20	Patient Assessment - MEDICAL	31	25
H-21 & 22	Patient Assessment -TRAUMA	41	33
H-23	Cardiac Arrest Management/AED	20	16
H-25	Epinephrine Auto-Injector	12	10
H-27	Bleeding Control/Shock Management	11	9
H-29	Immobilization Skills - LONG BONE	10	8
H-31	Immobilization Skills - JOINT INJURY	8	7
H-33	Immobilization Skills - TRACTION SPLINTING	14	12
H-35	Spinal Immobilization - LYING PATIENT	14	12
H-37	Spinal Immobilization - SEATED PATIENT	12	10

NOTE: A check mark in the Critical Criteria section of any of the above skills is a failure of the station regardless of the points attained.